2010 ELECTION CYCLE

REPORT OF REC

Delbert Hosemann ECRETARY OF STATE Campaign Finance Secretary of State

Name of Candidate Constitute to At-Blett Richard A. Darin
Address P. O. Box 286, Greenwood, MS 38935-0286 County Leftore
Telephone Work 662-453-8016 Home 662-453-2625 Fax 662-453-0145
Contact Name Floyd M. Melton, Jr. Email Address fromili@bellsouth.net
Office Sought Circuit Judge 4-1
Check here if above is different from previous report
May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010)
June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010)
July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010)
October 10, 2009 Periodic Report (July 1, 2010, through September 30, 2010)
October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010)
November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010)Runoff Candidates
January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010)

IMPORTANT

- Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-16-807 (b) (ii) and (iii).
- The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first worlding day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

itemized → Non-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions \$ 650.00 +\$	\$ 650.00	\$10,525.00
Total amount of disbursements \$ 4,667.15+\$	\$ 4,667.15	\$ 6,433.08
Total amount of cash on hand	\$ 4,217.42	

Committee Chairman

Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Pensities: Fallure to submit required reports, or fallure to submit reports in accordance with statutory deadlines, or fallure to submit reports abuli result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-16-811 and \$13 (1972).

SEND TO: 1. Candidates for Statewide, State district, mutil-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39206 or fax to 401-359-1499 or 401-478-2618.

2. Candidates for countywide and county district offices should return forms to their county Circuit Clark.

2010 ELECTION CYCLE

REPORT OF REC Name of Candidate Committee to Re-Elect Richard A. Smith

Delbert Hosemann SECRETARY OF STAT AN 0 7 2011 ampaign Finance ecretary of State

obligations

Address P. O. Box 286, Greenwood, MS 38935-0286 County Leflore BYATTE STINAME Telephone Work _662-453-8016 Home _ 662-453-2625 Fax 662-453-0145 Contact Name Floyd M. Melton, Jr. fmmiii@bellsouth.net Email Address Office Sought Circuit Judge 4-1 Check here if above is different from previous report November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).......Runoff Candidates January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).................................Mandatory Termination Report (Candidate will no longer accept contributions or make Required to terminate reporting campaign expenditures and has no outstanding campaign debt obligation)

IMPORTANT

- Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

temized + Non-itemized =	This Period	Calendar Year-To-Date
650.00 +\$	\$ 650.00	\$10,525.00
,667.15+\$	\$4,667.15	\$ 6,433.08
	\$ 4,217.42	
	650.00 +\$	650.00 +\$ \$ 650.00 ,667.15+\$ \$4,667.15

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Cantildate Committee Chairman

Authority: Refer to Miss. Code Ann. §23-15-501 (1972) et. seq. for statutory requirements. Pensities: Fallure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports ehalf requit in fines of \$60 per day end/or prosecution in accordance with Miss. Code Ann. §§ 23-16-811 and 813 (1972).

SEHD TO: 1. Candidates for Statestide, State district, multi-county and all legislative offices about return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39208 or fax to 601-259-1489 or 601-576-2819.

2. Cambildates for county-ride and county district offices should return forms to their county Circuit Clerk.

Page 1 of 2

Name of Candidate or Committee Committee to Re-Elect Richard A. Smith

Reporting period October 1, 2010 through December 31, 2010

ITEMIZED RECEIPTS

A. Source: Corporation PAC A Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Dr. Michael H. Carter, Jr.	10 /06 / 2010	\$ 200.00
Mailing Address P. O. Box 9969	_//_	\$
City, State, Zip Code Greenwood, MS 38930		\$
Name of Employer (Required) Self-Employed		\$
Occupation (Regulated) Doctor	Aggregate year-to-date	\$ 200.00
B. Source: Corporation PAC A Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name James S. Robbins, III	10 /06 / 2010	\$ 200.00
Mailing Address 205 Eighth Street	//	\$
City, State, Zip Code Greenwood, MS 38930		\$
Name of Employer (Required) Self-Employed		\$
Occupation (Required) Doctor	Aggregate year-to-date	\$ 200.00
C. Source: 🗆 Corporation 🗀 PAC 🕺 Individual 🗆 Loan	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Thomas M. Flanagan	10 /19/ 2010	\$ 100.00
Mailing Address : 308 East Barton Avenue	_//_	\$
City, State, Zip Gode Greenwood, MS 38930		s
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 100,00
D. Source: Corporation PAC Individual Loan Cother (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Whitman D. Mounger	10/26/2010	\$ 100.00
Mailing Address 122 Riverside Drive	!!	\$
City, State, ZIp Code Greenwood, MS 38930		\$
lame of Employer (Required) Self-Employed	//	\$
Occupation (Required) Attorney	Aggregate year-to-date	\$ 100.00

Page 2 of 2

Name of Candidate or Committee Committee to Re- Elect Richard A. Smith

Reporting period October 1, 2010 through December 31, 2010

ITEMIZED RECEIPTS

A. Source: Corporation PAC individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Wanda H. Clark	11 /05/ 2010	\$ 50.00
Meiling Address 303 W. Adams	_/_/_	\$
City, State, Zip Code Greenwood, MS 38930		\$
Name of Employer (Required)	11	\$
Occupation (Required)	Aggregate year-to-date	\$ 50.00
B. Source: ① Corporation ① PAC ② Individual ② Loan ② Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	//	\$
Mailing Address		\$
City, State, Zip Code		\$
Name of Employer (Regulard)		\$
Occupation (Required)	Aggregate year-to-date	\$
C. Source: D Corporation D PAC D Individual D Loan D Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	/	\$
Malling Address		\$
City, State, Zip Code		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		\$
Mailing Address		\$
City, State, ZIp Code		\$
Name of Employer (Required)		\$
Accupation (Required)	Aggregate year-to-date	\$

Page 1 of 2
Name of Candidate or Committee Committee to Re-Elect Richard A. Smith
Reporting period October 1, 2010 through December 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name	Date	Amount of each
The T-Shirt Co.	(Mo., Day, Year)	disbursement this period
Mailing Address		\$ 321.00
112 E. Washington Street	10/12/2010	
City, State, Zip Code		s
Greenwood, MS 38930		*
Purpose of Disbursement (Optional)	Aggregate	\$ 321,00
T-Shirts	Year-to-date	\$ 521,00
B. Fuil name	Date	Amount of each
Hammons & Associates	(Mo., Day, Year)	disbursement this period
Malling Address		\$ 1,395.00
P. O. Box 1999	10/ 15 / 2010	3 1,555,50
City, State, Zlp Code		\$ 997.00
Greenwood, MS 38935-1999	11/8/2010	3 997.00
Purpose of Disbursement (Optional)	Aggregate	\$ 2,392.00
Candidate Listing	Year-to-date	Ψ Dj. 7 D. 4 V
C. Full name	Date	Amount of each
The Greenwood Commonwealth	(Mo., Day, Year)	disbursement this period
Mailing Address		\$ 633.60
329 Hwy 82 W	10/26/2010	3 033.00
City, State, Zip Code		S 475,20
Greenwood, MS 38930	10/29/2010	473126
Purpose of Dishursement (Optional)	Aggregate	\$ 1,108.80
Candidate Listing	Year-to-date	3 1,106.60
D. Full name	Date	Amount of each
Gray Evans	(Mo., Day, Year)	disbursement this period
Mailing Address		\$ 300.00
306 E. Adams Avenue	10/29/2010	
City, State, Zip Code		\$ 300.00
Greenwood, MS 38930	11/9/2010	30000
Purpose of Disbursement (Optional)	Arterophy	\$ 600.00
Reimbursement for Campaign Expenses	Aggregate Year-to-date	\$ 000,00
E. Full name	Date	Amount of each
Dorothy Ward	(Mo., Day, Year)	disbursement this period
Mailing Address		\$ 50.00
	10/29/2010	3 30,00
City, State, Zip Code		\$
		•
Purpose of Disbursement (Optional)	Annacta	ê en 00
Poll Worker	Aggregate Year-to-date	\$ 50.00
P. Full name	Date	Amount of each
Bertare Billingsley	(Mo., Day, Year)	disbursement this period
Mailing Address		\$ 50.00
	10/29/2010	3 20.00
City, State, Zip Code		\$
		7
urpose of Disbursement (Optional)	Aggregate	\$ 50.00
Poll Worker	Year-to-date	A SAIGH

Page 2 of 2
Name of Candidate or Committee Committee to Re-Elect Richard A. Smith
Reporting period October 1, 2010 through December 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name	Date	Amount of each
What's Cooking	(Mo., Day, Year)	disbursement this perio
Mailing Address		\$ 48.15
309 W. Park Avenue	11/2/ 2010	3 76-13
City, State, Zip Code		
Greenwood, MS 38930		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 48.15
B. Full name	Date	Amount of each
KK's Delicatessen	(Mo., Day, Year)	disbursement this perio
failing Address	(100) 229 140)	
09 Grand Blvd.	11/2/2010	\$ 97.20
City, State, Zip Code		
Greenwood, MS 38930		8
'urpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 97.20
Full name	Date	America de la
	(Mo., Day, Year)	Amount of each disbursement this period
lailing Address		\$
ity, State, ZIp Code		s
urpose of Disbursement (Optional)	Aggregate	s
). Full name	Year-to-date	
	Date (Mo., Day, Year)	Amount of each disbursement this period
afiling Address		\$
lty, State, Zip Code		s
urpose of Disbursement (Optional)	Aggragate	s
. Full name	Year-to-date	
	Date (Mo., Day, Year)	Amount of each disbursement this period
alling Address		S
ly, State, Zip Code		s
rrpose of Disbursement (Optional)	Aggregate	\$
Full name	Year-to-date	
	Date (Mo., Day, Year)	Amount of each disbursement this period
illing Address	[=3 ==31 (Gal)	\$
iy, State, Zip Code		s
rpose of Disburgement (Optional)	Aggregate	\$
	Year-to-date	Ф